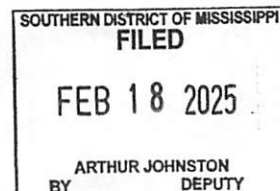


FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983
IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI

COMPLAINT

Easley
 (Last Name) (Identification Number)

Kelly Wayne
 (First Name) (Middle Name)

Pike County Jail
 (Institution)

2109 Jesse Hall Rd. Magnolia MS. 39652
 (Address)

(Enter above the full name of the plaintiff, prisoner and address of plaintiff in this action)

V.

CIVIL ACTION NUMBER: 5:25-cv-16-DCB-BWR
 (to be completed by the Court)

Pike County

Jail

(Enter the full name of the defendant(s) in this action)

GENERAL INFORMATION

- A. At the time of the incident complained of in this complaint, were you incarcerated?
 Yes (✓) No ()
- B. Are you presently incarcerated?
 Yes (✓) No ()
- C. At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?
 Yes () No (✓)
- D. Are you presently incarcerated for a parole or probation violation?
 Yes () No (✓)
- E. At the time of the incident complained of in this complaint, were you an inmate of the Mississippi Department of Corrections (MDOC)?
 Yes () No (✓)
- F. Are you currently an inmate of the Mississippi Department of Corrections (MDOC)?
 Yes () No (✓)

PARTIES

(In item I below, place your name and prisoner number in the first blank and place your present address in the second blank.)

I. Name of plaintiff: Kelly Wayne Easley Prisoner Number: N/A
 Address: 2109 Jesse Hall Rd. Magnolia MS. 39652

(In item II below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use the space below item II for the names, positions and places of employment of any additional defendants.)

II. Defendant: Pike County Jail is employed as _____
 _____ at Pike County MS.

The plaintiff is responsible for providing his/her address and in the event of a change of address, the new address of plaintiff as well as the name(s) and address(es) of each defendant(s). Therefore, the plaintiff is required to complete the portion below:

PLAINTIFF:

NAME: Kelly Wayne ADDRESS: 2109 Jesse Hall
Easley Rd. Magnolia MS. 39652

DEFENDANT(S):

NAME: Pike County ADDRESS: 2109 Jesse Hall
Jail Rd. Magnolia MS.
39652

OTHER LAWSUITS FILED BY PLAINTIFF

NOTICE AND WARNING

The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

- A. Have you ever filed any lawsuits in a court of the United States? Yes () No (✓)
- B. If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse of this page or additional sheets of paper.)

CASE NUMBER 1.

1. Parties to the action: _____

2. Court (if federal court, name the district; if state court, name the county): _____

3. Docket Number: _____
4. Name of judge to whom case was assigned: _____
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?) _____

CASE NUMBER 2.

1. Parties to the action: _____

2. Court (if federal court, name the district; if state court, name the county): _____

3. Docket Number: _____
4. Name of judge to whom case was assigned: _____
5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?) _____

STATEMENT OF CLAIM

- III. State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet(s) if necessary).

EVER SINCE IVE BEEN INCARCERATED
my Blood sugar has been come level low
Im in Fear OF my life
my Blood sugar has been documented
At and IN the 30's
The county Jail did send me to the doctor
I have not received NO Results on my Blood
Blood or Ultrasound Its making me mental

RELIEF

- IV. State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

Immediate Relief as an OWN Recognizance
of 150 dollars a day since October 2 2024
(Since Bond Reduction) I want Released
TO GO TO A Doctor of my choice and get Results

Signed this 12 day of February, 20 25.

I declare (or certify, verify or state) under penalty of perjury that the foregoing is true and correct.

Kelly Wayne Early
Signature of plaintiff

Kelly Wayne Easley1-26-25

- I've Been Incarcerated since September 21 2024
I've Fallen out multiple times since I've been here
I spent multiple months trying to get help
Because my Blood sugar would drop in the 30's
I could go into a Coma and/or Die
After months of Being Humiliated and made look
like I was a liar
They finally started me a chart checking my blood sugar
twice a day only After multiple incidents
of me falling out!!
Only Then did They make me an appointment
Keep in mind This is documented on a chart
my blood sugar has been in the 30's Multiple times
At the appointment They drew blood
When my Results came in my blood work
was Abnormal The Doctor at the Clinic Not This
Nurse here ordered an Ultra sound so Immediately
I Went Back to the Clinic For the Ultrasound
I still haven't been Notified About the Results
I'm assuming I'm a diabetic only Because
The Box of Food They serve me says Diabetic/Diet
THE numerous grievance and Requests I have
Turned in about My Life has been overlooked
and I Fear I'm going to die in here IF I
don't get out of here and get to a doctor of my
choice. I want to get a lawyer
It's crazy because I can Bond out for \$250
But I Am Indigent and have no one I've been here since
help me!! September 2024